2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 10, 2006 8:00 am
Secretary of State

03-30-2006 90033 035 ****61.25

DOCUMENT # N05000008288

1. Entity Name

FRIENDS OF DISABLED VETS, INC.

Principal Place of Business	Mailing Address
2464 VETERANS AVE. STUART FL 34994	2464 VETERANS AVE. STUART FL 34994

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

1st MOORE CR2E037 (10/05)

4. FEI Number 27-0126800 — Applied For / Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
HOAG, KEVIN 1545 NE OCEAN BLVD. #402 STUART FL 34996	Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature (typed or printed name of registered agent and title if applicable) (NOTE: Registered Agent signature required when registering) DATE

FILE NOW: FEE IS $61.25 Due By May 1, 2006

9. Election Campaign Financing Trust Fund Contribution. ☐ $5.00 May Be Added to Fees

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE DIRECTOR NAME BILL SHAW STREET ADDRESS 2464 VETERANS AVE CITY-ST-ZIP STUART, FL 34994	☐ Change ☑ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE PRESIDENT NAME FRANK MAITLAND STREET ADDRESS 2464 VETERANS AVE CITY-ST-ZIP STUART, FL 34994	☐ Change ☑ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE DIRECTOR NAME DONALD ARCHIBALD STREET ADDRESS 2464 VETERANS AVE CITY-ST-ZIP STUART, FL 34994	☐ Change ☑ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE DIRECTOR NAME HENRY NOLETTE STREET ADDRESS 2464 VETERANS AVE CITY-ST-ZIP STUART, FL 34996	☐ Change ☑ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE SECT/TREASURER NAME KEVIN HOAG STREET ADDRESS 2464 VETERANS AVE CITY-ST-ZIP STUART, FL 34996	☑ Change ☑ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE DIRECTOR NAME GARY FUDULOFF STREET ADDRESS 2464 VETERANS AVE CITY-ST-ZIP STUART, FL 34996	☐ Change ☑ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Kevin Hoag KEVIN HOAG 3/23/6 772-220-0144
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #